POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		1 9	11 27 00
FORMALITY REVIEW	MTB	954	1229·00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date	Claim		Date	Claim		Date
Final	Original		Final	Original		Final	Original	
(1)	✔		51	✔		101		
2	✔		52	✔		102		
3	✔		53			103		
4	✔		54			104		
5	✔		55			105		
6	✔		56			106		
7	✔		57			107		
8	✔		58			108		
9	✔		59			109		
10	✔		60			110		
11	✔		61			111		
12	✔		62			112		
13	✔		63			113		
14	✔		64			114		
15	✔		65			115		
(16)	✔		66			116		
17	✔		67			117		
18	✔		68			118		
19	✔		69			119		
20	✔		70			120		
21	✔		71			121		
22	✔		72			122		
23	✔		73			123		
24	✔		74			124		
25	✔		75			125		
26	✔		76			126		
27	✔		77			127		
28	✔		78			128		
(29)	✔		79			129		
30	✔		80			130		
31	✔		81			131		
32	✔		82			132		
33	✔		83			133		
34	✔		84			134		
35	✔		85			135		
(36)	✔		86			136		
37	✔		87			137		
38	✔		88			138		
39	✔		89			139		
(40)	✔		90			140		
41	✔		91			141		
42	✔		92			142		
43	✔		93			143		
44	✔		94			144		
45	✔		95			145		
46	✔		96			146		
47	✔		97			147		
48	✔		98			148		
49	✔		99			149		
50	✔		100			150		

If more than 150 claims or 10 actions
staple additional sheet here

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